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FAX COVER SHEET

Date: November 9, 2005	Phone Number	Fax Number
To: Examiner Khuong		(571) 273-8300
From: Kevin J. Zilka		
Docket No.: NAI1P443/01.053.01	NAI1P443/01.053.01 App. No: 09/912,305	
Total Number of Pages Being Transmitted, In	cluding Cover Sheet: 18	
Message:		
Please deliver to Examiner Khuong.		
Thank you,		
Jiming you,		`.
Jevin J. Zilka		

☐ Original to follow Via Regular Mail X Original will Not be Sent ☐ Original will follow Via Overnight Courier

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November 9, 2005

ZILKA-KOTAB, PC

NO. 0907 P. 2

NOV 09 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:		
Makinson et al.	Group Art Unit: 2665	
Application No. 10/912,305	Ex.: Khuong, Lee T.	
Filed: 07/26/01) November 9, 2005	
For: MALWARE SCANNING USING A NETV BRIDGE	VORK))	
CERTIFICATE OF FACSIMULE I hereby entity that this correspondence is being facsimile transmitted to the Commissioner for Patents, New Arthur 22313-1450 at facsimile number: (571) 273-8300 on the above date. Signed: Erica L. Farlow		

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

 \boxtimes

Transmitted herewith is an amendment in the above-identified application.

X X Applicant(s) hereby petition for a Three Month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no additional Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No.

If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-13-81 (Order No. NAI1P443). A copy of this sheet is enclosed for billing purposes.

> ubmitted, Respectfully

gistration No. 41,429

P.O. Box 721120

San Jose, CA 95172-1120 Telephone: (408) 971-2573

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NO. 0907 P. 3

NOV 09 2005

PATENT

APPA READ B

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If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P443). A copy of this sheet is enclosed for billing purposes.

> Respectfully submitted, Zilka/Kotab/PC

Kgwin J⁄Zilka

Kegistration No. 41,429

P.O. Box 721120

San Jose, CA 95172-1120 Telephone: (408) 971-2573

(Revised 1796)